

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000766

FILED
Jun 16, 2009
Secretary of State

Entity Name: PALM ISLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11681 ISLE OF PALMS DR
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

11681 ISLE OF PALMS DR
FORT MYERS BEACH, FL 33931

New Mailing Address:

FEI Number: 65-0727630 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ORT, KAREN
11681 ISLE OF PALMS DR
FORT MYERS BEACH, FL 33931 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ORT, KAREN
Address: 11681 ISLE OF PALM DR
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: VP () Delete
Name: DOMINGUEZ, PAUL
Address: 11521 ISLE OF PALMS DR
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: ST () Delete
Name: DOMINGUEZ, INDIRA
Address: 11521 ISLE OF PALMS DR
City-St-Zip: FORT MYERS BEACH, FL 33931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ORT, KAREN
Address: 11681 ISLE OF PALM DR
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: VP (X) Change () Addition
Name: PIPIA, DOMINIC
Address: 11501 ISLE OF PALMS DR
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: ST (X) Change () Addition
Name: HARTMAN, TERESA
Address: 11820 ISLE OF PALMS DR
City-St-Zip: FORT MYERS BEACH, FL 33931

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN ORT

Electronic Signature of Signing Officer or Director

PRES

06/16/2009

Date